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CONFIRMATION NO. 7650

SERIAL NUMBER 10/728,076	FILING DATE 12/04/2003 RULE	CLASS 341	GROUP ART UNIT 2819	ATTORNEY DOCKET NO. 03CR101/KE					
APPLICANTS Ray Lynn Cross, Cedar Rapids, IA;									
** CONTINUING DATA ***** <i>None</i>									
** FOREIGN APPLICATIONS ***** <i>None</i>									
<table style="width: 100%; border: none;"> <tr> <td style="width: 45%; border: none;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Robert Collins</i> <div style="display: flex; justify-content: space-between;"> Allowance Examiner's Signature Initials </div> </td> <td style="width: 15%; border: none; text-align: center;"> STATE OR COUNTRY IA </td> <td style="width: 15%; border: none; text-align: center;"> SHEETS DRAWING 5 </td> <td style="width: 15%; border: none; text-align: center;"> TOTAL CLAIMS 28 </td> <td style="width: 10%; border: none; text-align: center;"> INDEPENDENT CLAIMS 4 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Robert Collins</i> <div style="display: flex; justify-content: space-between;"> Allowance Examiner's Signature Initials </div>	STATE OR COUNTRY IA	SHEETS DRAWING 5	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 4
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ADDRESS 26383 ROCKWELL COLLINS, INC. INTELLECTUAL PROPERTY DEPARTMENT 400 COLLINS ROAD NE M/S 124-323 CEDAR RAPIDS , IA 52498									
TITLE Method and apparatus for multiple input diversity decoding									
FILING FEE RECEIVED 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____
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